

Check-In Survey for School Staff Summerfield Education Centre

Name: (optional) _____

How are you feeling?

Please take a few minutes to answer each of the questions on this survey as thoroughly as possible, so that we can have a better idea of how best to support you.

1. What has been your main worries and concerns, if any, about coming back to work, and why?

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2. How do you feel about coming back to work?

(Rank 1-5 where 1 is Very Unhappy and 5 is Very Happy)

1	2	3	4	5

Why is that?

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3. How would you rate your level of communication from work throughout Lockdown?

(Rank 1-5, where 1 is Poor and 5 is Excellent)

1	2	3	4	5

4. What measures are in place to help you feel safe and secure at work? Are there any other measures you would like to see in place?

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5. Have you experienced any of the following during Lockdown or the summer? (Please tick all that apply)

- Bereavement
- Loss of routine
- Loss of finances
- Loss of safety
- Loss of hopes, dreams, and expectations
- Loss of health
- Feelings of loss around seeing friends and family
- Relationship breakdown
- Lack of sleep/too much sleep
- Irritable
- Short tempered
- Eating/drinking more
- Throwing yourself into something, e.g. exercise, work, gaming
- Isolation
- Other _____

6. Do you have someone to talk to at home and work about how you feel?

7. How supported at work do you feel?
(Rank 1-5 where 1 is Unsupported and 5 is Totally Supported)

1	2	3	4	5

8. Have you been bereaved this year?

Yes/No

If yes, what support have you received?

9. Is there anything we can do to support you with being back at work on a practical level or emotionally?

10. What are you looking forward to most about being back at work and this academic term?